PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10696529

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			7.5		<u> </u>		_	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			ASIC FEE	 	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			\? minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			9 minus 3 =		*		-	X43=		1	X86=		
Мι	ILTIPLE DEPE	NDENT CLAIM P	RESENT		<u> </u>				<u> </u>	OR			
 -	the difference	e in column 1 is	less than 7	ero enter	"0" in o	olumn 2		+145=		OR	+290=		
*1						Olumn 2	7	TOTAL		OR	TOTAL	770	
		(Column 1)	MENDEL	(Colun	nn 2)	(Column 3)		SMALL ENTITY			OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=	i	OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
L_	FIRST PRESE	NTATION OF MI	JETIPLE DEI	PENDENT	CLAIM		-	-145=		OR	+290=		
								TOTAL			TOTAL		
		(Column 1)		(Colun	nn 2)	(Column 3)	ADI	DIT. FEE			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=	·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	,	
		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	01.111.1		×	(43=		OR	X86=	`	
Ľ		NTATION OF ML					+	145=		OR	+290=	- 3	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										L			
	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is	less than	20, enter "20."	חחא		,	OR ,	TOTAL DDIT. FEE		